I351.84 I29af 2 1983 c.3 8736322 AUG 05 1983

ILLINOIS DOCUMENTS

AID TO FAMILIES WITH DEPENDENT CHILDREN



Illinois Department of Public Aid

AID TO FAMILIES WITH DEPENDENT CHILDREN

The purpose of the AFDC program is to maintain and strengthen family life by providing financial and medical assistance to families whose children are deprived of financial support or care by parents for various reasons. These reasons include physical or mental incapacity, unemployment of a parent, or continued absence of a parent for such reasons as death, divorce, separation and imprisonment.

APPLICATION

Parents or other caretaker relatives must make application at local county offices of the Illinois Department of Public Aid. In Cook County, applicants apply at offices serving their zip code areas.

An applicant may be assisted by local office staff or by an individual of the applicant's choice in completing necessary forms. If an applicant is physically unable to come to the office, the caseworker will take the application to the home.

Application may be made for all or only some of

the children living together in the household.

ELIGIBILITY

THE FAMILY

To be eligible for AFDC, a child must be living with a specified relative in the relative's home. The relative must be a blood relative--mother, father, grandparent, sister, uncle, aunt, first cousin, niece/nephew--or an adoptive father, mother, or certain step-relatives.

AGE OF CHILDREN

To qualify, a child must be under 18 years of age or age 18 and a full-time student in high school or an equivalent vocational school and be expected to finish before reaching 19. To be eligible, children 16 or over who are not in grade school, high school or an equivalent vocational training full-time must register for the WIN Demonstration Program (WDP). CITIZENSHIP

Only individuals who are citizens of the United States by birth or naturalization, or aliens lawfully admitted for permanent residence are eligible for assistance.

RESIDENCE

To be eligible for AFDC, the child and the parent or other relative with whom the child is living must reside in Illinois with intent to remain.

INCOME

A family is eligible for assistance if the income from earnings, pensions, insurance benefits, contributions or other sources is not enough to meet their needs according to the Illinois Department of Public Aid payment level.

In certain cases, income exemptions for working persons are deducted. Income available after certain exemptions is budgeted to determine the amount of the assistance payment.

SUPPORT FROM RELATIVES

Illinois laws recognize that certain relatives are held responsible for support of needy persons. Legal responsibility for contributing toward a relative's support is limited to: (1) spouse for spouse, (2) parents for children under 18 years of age, and (3) parents for children 18 to 21 years of age who have not established a consistent pattern of independent living. Step parents are not legally responsible for their step children, however part of a step parent's income may be considered available to the step children. Relatives legally responsible for providing financial assistance to members of their families are: (1) required to supply the Department with information about their financial circumstances and ability to support; (2) required to pay any support directly to the Department. Legal action may be taken to secure support from legally responsible relatives.

Under State law, by your application for or receipt of assistance, you automatically assign your rights to support for yourself and your children to the Department. This means that the Department of Public Aid has the right to any support money you might receive from the absent parent of the children for whom you are applying or receiving assistance. As a condition of your eligibility for assistance (but not the children's elgibility), you must cooperate with the Department's Support Enforcement Program unless you claim good cause for non-cooperation would be against the best interests of the child.

The Department, whenever possible, will attempt to find the absent relatives and to obtain support from them. If you refuse to cooperate with the Department in locating an absent parent or spouse, your needs may not be included in the assistance grant unless you have a reason for refusing to cooperate with these requirements and the Department determines the reason is valid.

SOCIAL SECURITY NUMBERS

Applicants and recipients are required to furnish the Department with Social Security numbers for all individuals, both adults and children, for whom AFDC money payments are requested. The furnishing of the Social Security number is a condition of each individual's eligibility required by Section 402(a)(25) of the Social Security Act. This requirement is to help the Department identify

individuals, and verify eligibility and income. No AFDC money payment will be provided for anyone for whom either a Social Security number is not furnished or an application for a Social Security number is not made.

STRIKERS

Individuals participating in a strike are not eligible. If the person on strike is the parent of the children, the entire case is ineligible.

ASSETS

The following assets are not considered when a family's eligibility for AFDC is determined: a home which is the usual residence of the family; clothing and personal effects; household furnishings; a motor vehicle worth \$1500 or less.

Additionally, the family may have other assets, or personal property including cash worth up to \$1,000.

DUTY TO REPORT CHANGES
IN ASSETS, INCOME AND NEEDS

It is the responsibility of the AFDC recipient to report any changes in family size, address, or receipt of income or assets which might affect the recipient's assistance. This information must be reported to the local office within five working days of the change or prior to spending income or assets, whichever comes first. Notification can be made in person, or by letter or phone call.

MONTHLY REPORTING

Persons with the following case situations are required to file a report on the household's circumstances and income each month: families with earned income; families receiving AFDC for a child 18 years of age; families with a stepparent in the home; and, families with Unemployment Insurance (UI) benefits, or whose UI benefits have ended in one of the last three months.

You will be sent a report form to complete, sign and return to the Public Aid office by a specific due date each month.

If you have income from employment, you must report and provide proof of the amount of pay you receive each month. The information must be received by the end of the monthly due date. If you fail without good cause to report income by the due date, you will not be eligible to receive the income disregard for employment expenses or the earned income exemption and day care deduction for that month.

A family which receives more aid than it is entitled to is required by law to pay back the amount of any overpayment made by the Department. If the money is not repaid, the state may take legal action





to recover it or deduct if from future assistance payments. If it is determined that the Department did not pay you all of the assistance to which you were entitled, you will be issued a check for the amount of the underpayment.

DETERMINATION OF ELIGIBILITY

The local public aid office will need certain information to determine whether an applicant is eligible or ineligible. If necessary, local office staff will help secure the required information.

The Department has entered into agreements with other agencies in an effort to get information about applicants and recipients to determine eligibility. Information received in this manner is used only for administration of the AFDC program and is held in strict confidence by Department staff. Any employee who violates the confidential nature of this information is subject to dismissal and/or fine and imprisonment.

The local office will review the family's circumstances to determine continued eligibility at least once every six months.

RESPONSIBILITY OF APPLICANT

The parent or other relative who applies for AFDC has the primary responsibility to furnish the information needed to establish that the family meets the eligibility requirements for assistance. If the applicant is unable to obtain the needed information without cost or hardship, he/she should seek help from the local office of the Department of Public Aid serving his/her zip code.

To establish the family's need for public assistance, full information must be given about income, assets and means of support at the time of application. Any change in circumstances must be

reported within five working days.

The applicant is also expected to cooperate by keeping appointments and by having any medical examination which may be required.

NOTIFICATION

Prompt attention is given to determining eligibility of the family. A decision will be made and the applicant will be notified within 45 days of the date of application.

APPEALS

An applicant for or recipient of public assistance has the right to appeal any of the following actions of the Department: 1. Refusal to accept an application or reapplication; 2. Failure to act upon an application within the mandated time period; 3. A decision to deny an application; 4. A decision granting aid to an amount which the client deems inadequate; 5. A decision to reduce, suspend, terminate or in any way change the amount of assistance or manner in which it is provided; 6. An issue of Department policy, if the client is aggrieved by its application to his/her situation; 7. Failure to make a decision or take appropriate action on any request which the client makes.

If the appeal is filed within 10 days after the date of the written notification of the Department's decision to reduce, suspend, or cancel assistance, the Department's action will not be taken until an appeal decision is made. However, if the recipient loses the appeal and received financial assistance during the appeal period which would not have been received except for the appeal, the overpayment must be repayed to the department or may be deducted from future assistance payments.

The recipient, applicant or authorized representative must exercise the right to appeal in writing within 60 calendar days of the date on the written notice of the decision of the local office. The Department will send a letter explaining its decision to the person who has appealed, or the appellant's representative, if appropriate, and the local office, usually within 60 days after the appeal is made.

Before and during the hearing, the person appealing and/or an authorized representative may examine all portions of the case record and any

other documents used at the hearing.

Appeals can be made without cost to the applicant or recipient. The request for an appeal can be filed on forms obtained from the local office. The hearing will be conducted by a state hearing officer in the county where the applicant or recipient lives. The person appealing can explain the case and have others present to help relate the facts.

CIVIL RIGHTS

On the basis of race, color, national origin, sex, religious beliefs, handicap or political affiliations, the Department of Public Aid shall not 1) deny any individual care, aid, or other benefits provided under the public assistance programs; 2) differentiate in the extent and manner in which these benefits are provided; 3) subject an individual to segregation or separate treatment in determining eligibility or other requirements to qualify for benefits; or 4) deny or offer anyone an opportunity different from that offered others, including the opportunity to participate in education, training and

employment-training programs.

No direct payment for goods and services provided shall be made by the Department to any agency, institution, organization or individual vendor which initiates or continues prohibited discriminatory practices.

Persons with complaints concerning alleged discriminatory conditions or practices by the Department of Public Aid or other agencies, institutions, organizations or individuals providing care or services to an individual relative to his status as a public aid recipient may do so in writing to the county Department of Public Aid or to the Illinois Department of Public Aid, Supervisor of Inquiries and Referrals, 316 So. 2nd St., Springfield, Illinois. The complaint may be sent in a letter, or written on a form (DPA 185, Complaint Concerning Alleged Discrimination,) which can be obtained from the local office.

The Department will investigate all complaints promptly and take corrective action when warranted. The Director of the Department will review the action taken, and the complainant will be informed in writing of the disposition of his/her complaint.

THE ASSISTANCE PAYMENTS

The AFDC grant is designed to provide a family with a single monthly check, the amount varying according to family size, location in the state and whether the assistance unit includes an adult. The grant amount is rounded down to the nearest dollar.

Individuals are not eligible for AFDC if receiving SSI. Assistance may be provided to adults if the only child(ren) in the home is eligible for AFDC but is receiving SSI.

Some working persons are eligible for AFDC. Employed persons eligible for AFDC may receive a deduction of \$75, if full time employed, or \$60 if part time employed, for employment expenses and a deduction for day care costs in an amount up to \$160 if full time employed or \$128 if part time employed. Some earnings may be exempt for four months when determining the amount of the assistance payment.

In some cases, only the children will be included in an assistance unit. This happens when the caretaker adult is self-supporting or is being supported, or when the adult is not eligible for some other reason.

SPECIAL NEED PAYMENTS

In addition to the grant amount, the Department also provides assistance payments to meet certain special needs. Payments which may be authorized include the cost of a therapeutic diet for a diabetic; an allowance for a junior or senior in high school; day care for education or training; and day care for employment when the caretaker relative is not the parent and is not receiving AFDC. A separate written request must be made to receive these special need payments.

The Crisis Assistance Program is designed to meet extraordinary or unusual needs not provided

inrough the Payment Level.

MEDICAL ASSISTANCE

All AFDC recipients are eligible for medical care under the Medical Assistance Program and the companion Medichek program, a well-care plan that provides eligible children with checkups and immunizations. Eligibility for medical care may be retroactively effective up to three months prior to the date of application.

Payments for medical care are made directly

to the source of care.

FOOD STAMPS

Most persons receiving AFDC are eligible to receive food stamps. The amount of food stamps, which are directly redeemable for food products, varies according to the size and income of the family.

FUNERAL AND BURIAL EXPENSES

The Department will pay funeral and burial expenses of an eligible applicant or recipient according to the Department's standard if the estate is insufficient to pay these expenses and the legally responsible relatives are financially unable to pay these costs and there are no resources for this purpose.

REGISTRATION AND
PARTICIPATION REQUIREMENTS

All AFDC recipients, except those determined exempt, are registered with the WIN Demonstration Program (WDP). Non-exempt recipients are required to participate when called in by WDP staff. Failure to participate will result in sanctions imposed on the assistance unit.

Recipients, both exempt (volunteers) and nonexempt may be allowed to participate in education or training programs through the WDP as a means

of becoming employed.

Basic Amount Per Month*

Dasic Amount Per Wontin							
Family		Grou	рΙ	Group II			
Size	N	lo Adult	Adult	No Adult	Adult	N	0
1		\$ 80	\$198	\$ 71	\$190		\$
2		\$153	\$250	\$139	\$236		\$
3		\$225	\$302	\$206	\$284		\$
4		\$288	\$368	\$275	\$348		\$
5		\$354	\$434	\$340	\$413		\$
6		\$417	\$495	\$403	\$477		\$
7		\$479	\$556	\$463	\$536		\$
8		\$511	\$591	\$501	\$573		\$
9		\$571	\$649	\$556	\$628		\$
10		\$622	\$700	\$609	\$681		\$
11		\$674	\$752	\$663	\$735		\$
12		\$735	\$814	\$722	\$794		\$

PUBLIC REGISTERS

Local offices are required by law to maintain registers in the offices showing the names, addresses and amounts of assistance received by recipients of AFDC. All other information obtained by local offices about applicants and recipients is strictly confidential. The registers may not be used for commercial, personal or political purposes. Any violation of this rule is punishable by a fine, imprisonment or both.

Persons requesting to see the registers will be asked to complete Department request forms.

CHANGE OF ADDRESS

Before a family moves to a different address, a change of address must be reported to the local Public Aid office. The post office will not forward AFDC checks to a new address.

Housing Costs

oup	111	be reflected in	ousing costs from grants under the	county to county will e Illinois Consolidated			
.14	A	Standard Plan. Group I/highest housing costs					
ult	Adult	- Boone Kane Ogle					
		Champaign	Kankakee	Whiteside			
\$161		Cook	Kendall	Winnebago			
		DeKalb	Lake	Woodford			
		DuPage	McHenry				
	\$205	Group II/lower housing costs					
	Ψ <u></u>	Adams	Jo Daviess	Moultrie			
		Bureau	Knox	Peoria			
	\$251	Carroll	LaSalle	Piatt			
	Ψ20.	Clinton	Lee	Putnam			
		Coles	Livingston	Rock Island			
	\$309	DeWitt	Logan	Sangamon			
	ΨΟΟΟ	Douglas	Macon	St. Clair			
		Effingham	Macoupin	Stephenson			
	\$374	Ford	Madison	Tazewell			
φ	ΨΟΙΤ	Fulton	McDonough	Vermilion			
		Grundy	McLean	Wabash			
	\$434	Henry	Mercer	Warren			
Φ40	Ψτυτ	Iroquois	Monroe	Will			
		Jackson	Morgan				
	\$494	Group III/lowest h		8.4			
,	Φ454	Alexander	Hamilton	Pike			
		Bond	Hancock	Pope			
	¢ E07	Brown	Hardin	Pulaski			
,	\$527	Calhoun	Henderson	Randolph			
		Cass	Jasper	Richland			
!	0501	Christian	Jefferson	Saline			
	\$581	Clark	Jersey	Schuyler			
		Clay	Johnson	Scott			
	# 007	Crawford	Lawrence	Shelby Stark			
)	\$627	Cumberland	Marion				
		Edgar	Marshall	Union Washington'			
	0004	Edwards	Massac	Washington			
}	\$684	Fayette Franklin	Massac Menard	White			
		Gallatin	Montgomery	Williamson			
	A =0=	Greene	Perry	Williamson			
)	\$737	Greene	reny				

FRAUD

Under Illinois law, persons who make false statements or who willfully deceive and misrepresent their circumstances to the Department or persons who willfully fail to report changes in income, property or need which affect the amount of assistance they are entitled to are subject to penalties.

Persons found guilty of fraud will be required to repay the state the amount of assistance received and, in addition, may be fined, imprisoned or both. Anyone who helps or encourages misrepresentation of a case by any means is, by law, also guilty of fraud.

Basic Amount Per Month*	*	Housing Costs			
Group I	Group II	Group III	Differences in housing costs from county to county will be reflected in grants under the Illinois Consolidated Standard Plan		
Size No Adult Adult	No Adult Adult	No Adult Adult			

Group I		Group II		Group III		Differences in his		
Family Size	No Adult	Adult	No Adult	Adult	No Adult	Adult	Standard Plan Group I/highest hi Boone	
1	\$ 80	\$198	\$ 71	\$190	\$ 66	\$161	Champaign Cook DeKalb	
2	\$153	\$250	\$139	\$236	\$130	\$205	DuPage Group II/lower ho Adams	
3	\$225	\$302	\$206	\$284	\$198	\$251	Bureau Carroll Clinton	
4	\$288	\$368	\$275	\$348	\$261	\$309	Coles DeWitt Douglas Effingham Ford Fulton Grundy Henry Iroquois	
5	\$354	\$434	\$340	\$413	\$327	\$374		
6	\$417	\$495	\$403	\$477	\$384	\$434		
7	\$479	\$556	\$463	\$536	\$445	\$494	Jackson Group III/lowest t Alexander Bond	
8	\$511	\$591	\$501	\$573	\$480	\$527	Brown Calhoun Cass	
9	\$571	\$649	\$556	\$628	\$532	\$581	Class Christian Clark Clay Crawford Cumberland Edgar	
10	\$622	\$700	\$609	\$681	\$580	\$627		
11	\$674	\$752	\$663	\$735	\$634	\$684	Edwards Fayette Franklin	
12	\$735	\$814	\$722	\$794	\$689	\$737	Gallatin Greene	

Whiteside Kankakee Kendall Winnebago Woodford Lake McHenry ousing costs Jo Daviess Moultrie Knox Peoria LaSalle Piatt Putnam Lee Livingston Rock Island Logan Sangamon St. Clair Macon Macoupin Stephenson Madison Tazewell Vermilion McDonough Wabash McLean Warren Mercer Will Monroe Morgan housing costs Pike Hamilton Hancock Pope Pulaski Hardin Randolph Henderson Richland Jasper Saline Jefferson Jersey Schuyler Johnson Scott Shelby Lawrence Stark Marion Marshall Union Washington Mason Wayne Massac White Menard Williamson Montgomery Perry

PUBLIC REGISTERS

B

Local offices are required by law to maintain registers in the offices showing the names, addresses and amounts of assistance received by recipients of AFDC. All other information obtained by local offices about applicants and recipients is strictly confidential. The registers may not be used for commercial, personal or political purposes. Any violation of this rule is punishable by a fine, imprisonment or both.

Persons requesting to see the registers will be asked to complete Department request forms.

CHANGE OF ADDRESS

Before a family moves to a different address, a change of address must be reported to the local Public Aid office. The post office will not forward AFDC checks to a new address.

FRAUD

Under Illinois law, persons who make false statements or who willfully deceive and misrepresent their circumstances to the Department or persons who willfully fail to report changes in income, property or need which affect the amount of assistance they are entitled to are subject to penalties.

Persons found guilty of fraud will be required to repay the state the amount of assistance received and, in addition, may be fined, imprisoned or both. Anyone who helps or encourages misrepresentation of a case by any means is, by law, also guilty of fraud.

I 351,84 I 29af 2

OTHER SERVICES

other services to families receiving AFDC. For example: helping them to obtain essential medical care and family planning services.







The Illinois Department of Public Aid does not discriminate in admission to, or treatment or employment in programs or activities in compliance with the Illinois Human Rights Act, Section 504 of the Rehabilitation Act, as amended, and the U.S. Constitution.

DPA 586 (R-6-83)

Illinois Department of Public Aid 316 South Second Street Springfield, Illinois 62762

Printed by the Authority of the State of Illinois 80.525 P O #1007